Supplementary material: Questions assessing behavioural risk factors for cervical cancer

Do you currently smoke?
- Yes ☐
- No ☐

If not, have you ever smoked cigarettes regularly?
- Yes ☐
- No ☐

Have you had a vaccine for HPV/cervical cancer?
- Yes ☐
- No ☐
- Not sure ☐

If yes, how many doses have you received?
- 1 ☐
- 2 ☐
- 3 ☐
- Not sure ☐

Have you ever had a cervical screening test (smear)?
- Yes ☐
- No ☐
- Not sure ☐

Have you ever had sexual intercourse (By sexual intercourse we mean vaginal sex)
- Yes ☐
- No ☐
- Rather not say ☐

[Further questions only presented to those who responded yes to having ever had sexual intercourse]

The next questions are about your sexual health. Please include every person you have ever had sexual intercourse with whether it was just once or several times or a regular partner. We would like to assure you that all information is strictly confidential and only the research team will have access to it.

Please indicate how old you were when you first had sexual intercourse?
- Age ........
- Not sure of age ☐
- Rather not say ☐

How many people have you had sexual intercourse with?
- 1 ☐
- 2 ☐
- 3-4 ☐
- 5-9 ☐
- 10-20 ☐
- 20+ ☐
- Not sure ☐
- Rather not say ☐

When you have sexual intercourse how often do you use a condom?
- Never ☐
- Hardly at all ☐
- Less than half the time ☐
- About half the time ☐
- Most times ☐
- Every time ☐
- Rather not say ☐

Has a doctor or health professional ever told you that you had a sexually transmitted infection (STI)?
- Yes ☐
- No ☐
- Not sure ☐
- Rather not say ☐